

LIBBYING REGISTRATION FORM

1 for initial registrations and renewals.

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 12/1/03

Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Corinne Maxine
Last _____ First _____ MI _____

2. BUSINESS PHONE (225) 383-5554
Area Code and Phone Number

3. BUSINESS ADDRESS 442 Europe St.
Street and No. Baton Rouge LA 70802
City State Zip

MAILING ADDRESS P. O. Drawer 4289
Street and No. Baton Rouge, LA 70821-4289
City State Zip

4. EMPLOYER Louisiana Trial Lawyers Association

5. EMPLOYER'S ADDRESS 442 Europe St.
Street and No. Baton Rouge LA 70802
City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Louisiana Trial Lawyers Association

Address 442 Europe St., Baton Rouge, LA 70802

Business or purpose Voluntary bar association

organization

Does this person pay you? Yes

If No, who pays you? _____

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2. Name Association for Clinical Social Work

Address 5829 Dijon Dr., Ste. 105*, Baton Rouge, LA 70808

Business or purpose social workers association
organization

Does this person pay you? Yes

If No, who pays you? _____

3. Name Unigry Corporation/Baton Rouge

Address P. O. Box 2431, Baton Rouge, LA 70821

Business or purpose energy entity
organization

Does this person pay you? Yes

If No, who pays you? _____

4. Name Global Elections Systems, Inc.

Address 605 O'Neal Dr., Jamestown, NC 27282

Business or purpose election systems company
organization

Does this person pay you? Yes

If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

ATTACH
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PHOTOGRAPH
HERE
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REGISTRATION
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Lobbyist's Registration Number5. Name Louisiana Physical Therapy AssociationAddress 8550 United Plaza Blvd., Ste. 1001, Baton Rouge, LA 70809Business or purpose Association of Physical Therapists
ORGANIZATIONDoes this person pay you? Yes

If No, who pays you? _____

6. Name Louisiana Hospital AssociationAddress 9521 Brookline Ave., Baton Rouge, LA 70809Business or purpose Association of hospitals
associationDoes this person pay you? Yes

If No, who pays you? _____

** Name _____

Address _____

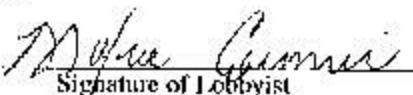
Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

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